

Important Notice Regarding Vaccine Issues

Idaho Immunization Program

July 25, 2006

(Please share this with all immunization staff members)

**** Status of the Menactra and Tdap distribution startup and supply****

The national supply of Menactra remains extremely limited and will continue to affect the Idaho Immunization Program's (IIP) ability to fill some orders for another year. The good news is that the IIP supply of Tdap should now be adequate to fill all orders.

Most of Idaho's Immunization providers began ordering Menactra and Tdap from the IIP on May 1st. To date the IIP has distributed 3,690 doses of Menactra valued at \$250,920 and 5,480 doses of Tdap valued at \$167,070 to 161 offices throughout the state.

Because the IIP receives only a limited monthly allotment of each vaccine including Menactra and Tdap there may be times when there are not enough doses of a vaccine or vaccines available to send providers all the vaccine/s that are ordered. Typically 10 to 20 doses of any vaccine may equal the recommended 6 to 12 month supply of vaccine for small providers. For medium sized providers a 2 to 3 month supply is the recommended order size, and for large providers who order once per month a 1 to 2 month supply is recommended.

**** Menactra Recommendation to Defer Vaccination of 11 and 12 Year Olds ****

Sanofi Pasteur anticipates that Menactra (MCV4) demand will outpace supply at least through summer 2006. On May 26th in the MMWR 55(20); 567-568, the CDC's Advisory Committee on Immunization Practices (ACIP) recommended that providers continue to vaccinate adolescents at high school entry who have not previously received MCV4 and college freshmen living in dormitories. However, current supply projections from Sanofi Pasteur suggest that not enough MCV4 will be available to meet vaccine demand for all the originally recommended groups. **Until further notice, administration of MCV4 to persons aged 11--12 years should be deferred.** If possible, providers should track persons aged 11--12 years for whom MCV4 has been deferred and recall them for vaccination when supply improves. Other persons at high risk for meningococcal disease (i.e., military recruits, travelers to areas where meningococcal disease is hyperendemic or epidemic, microbiologists who are routinely exposed to isolates of *N. meningitidis*, persons with anatomic or functional asplenia, and persons with terminal complement deficiency) should also be vaccinated. For vaccination of most persons, MCV4 is preferable to Menomune which is also manufactured by Sanofi Pasteur. If MCV4 is not available Menomune is an acceptable alternative to Menactra however availability of Menomune is also limited and is not available through the IIP.

Vaccine supply updates are available at <http://www.cdc.gov/nip/news/shortages/default.htm>.

Reference

[CDC. Prevention and control of meningococcal disease: recommendations of the Advisory Committee on Immunization Practices \(ACIP\). MMWR 2005;54\(No. RR-7\).](#)

**** ACIP Meeting Update Regarding New Vaccine Recommendations ****

On June 29-30, 2006, the Advisory Committee on Immunization Practices (ACIP) met in Atlanta, GA. Following is a summary of key votes from the ACIP's June meeting:

HPV VACCINE: The ACIP voted to recommend that a newly licensed vaccine designed to protect against human papillomavirus (HPV) be routinely given to girls at the age of 11-12 years. The ACIP recommendation also allows for vaccination of girls beginning at 9 years, and supports vaccination of females from 13 to 26 years of age who have not been previously vaccinated. According to the ACIP's recommendation, 3 doses of the new vaccine should be routinely given to girls when they are 11 or 12 years old. The advisory committee, however, noted that the vaccination series can be started as early as 9 years of age at the discretion of the physician or healthcare provider. The vaccine should be administered before onset of sexual activity (i.e., before women are exposed to the viruses), but females who are sexually active should still be vaccinated.

The ACIP passed a resolution that included HPV vaccine in the Vaccines for Children (VFC) program. VFC-eligible children 9 through 18 years of age are entitled to receive VFC vaccine. For more information about HPV and the HPV vaccine, please visit <http://www.cdc.gov/nip/vaccine/hpv/default.htm>

VARICELLA VACCINE: The ACIP voted to recommend a second dose of varicella (chickenpox) vaccine for children aged 4-6 years to further improve protection against the disease. The first dose of varicella vaccine is recommended at the age of 12-to-15 months. The ACIP also recommended that children, adolescents, and adults who previously received 1 dose should receive a second dose. The ACIP passed a VFC resolution to include the second dose of varicella in the Vaccines for Children program. Fifteen to 20 percent of children who have received one dose of the vaccine are not fully protected and may develop chickenpox after coming in contact with varicella zoster virus. Additionally, 1 dose of the vaccine may not continue to provide protection into adulthood when chickenpox is more severe. A second dose of varicella vaccine provides increased protection against varicella disease compared [with] one dose. For more information about varicella and the varicella vaccine, please visit <http://www.cdc.gov/nip/menus/vaccines.htm#varicella>

These recommendations are currently under review by the Director the Department of Health and Human Services (HHS) and will become official when published in the [CDC's Morbidity and Mortality Weekly Report](#) (MMWR). Once official, the acquisition of federal and state funding to support inclusion of these vaccines into the IIP will be sought. The IIP has requested additional state funding to supply Rotavirus vaccine, a 2nd dose of Varicella vaccine and the MMR/Varicella combination vaccine (ProQuad). This request will be considered by the Idaho legislature in 2007. A funding request for HPV vaccine will not be considered until the 2008 Legislative session. The IIP will provide updates on the new vaccines as they are recommended. **For Idaho providers who wish to begin use of the new vaccines, or to implement the 2nd dose of Varicella vaccine the only option available at this time is for the private purchase of these vaccines. Until the IIP is able to secure funding for these recommendations there is not enough funding or vaccine available for the IIP to implement them.**

******* 2006/2007 Influenza Recommendations and Ordering Information *******

Influenza recommendations for the 2006/2007 season were just published in a June 28, 2006 MMWR 55(Early Release). The 2006 recommendations include new and updated information. **Principal changes include**

- 1) recommending vaccination of children aged 24 through 59 months and their household contacts and out-of home caregivers against influenza;**
- 2) highlighting the importance of administering 2 doses of influenza vaccine for children aged 6 months to 9 years who were previously unvaccinated;
- 3) advising health-care providers, those planning organized campaigns, and state and local public health agencies to a) develop plans for expanding outreach and infrastructure to vaccinate more persons than the previous year and b) develop contingency plans for the timing and prioritization of administering influenza vaccine, if the supply of vaccine is delayed and/or reduced;
- 4) reminding providers that they should routinely offer influenza vaccine to patients throughout the influenza season;

- 5) recommending that neither *amantadine* nor *rimantadine* be used for the treatment or chemoprophylaxis of influenza A in the United States until evidence of susceptibility to these antiviral medications has been re-established among circulating influenza A viruses; and
- 6) using the 2006/2007 trivalent influenza vaccine virus strains: A/New Caledonia/20/1999 (H1N1)-like, A/Wisconsin/67/2005 (H3N2)-like and B/Malaysia/2506/2004-like antigens. Additional information regarding this information can be accessed at <http://www.cdc.gov/flu>.

The IIP expects to receive multiple presentations and shipments of flu vaccine from several manufacturers over the course of several months during the 2006/2007 flu season. The expected 2006/2007 flu delivery schedule will probably consist of about 1/3 of the IIP's total vaccine order arriving for distribution by the end of the first week in October. Then about 3 weeks later another 1/3 or more of the total IIP vaccine order will arrive. And finally the remaining vaccine will trickle in sometime between mid November and Mid January.

The IIP purchases Influenza vaccine from CDC contracts and is limited by an allotment system to a certain number of doses of each type/brand of flu vaccine. The IIP allotments for any single vaccine may not cover all provider orders for that specific vaccine during the 2006/2007 season. So, providers should expect that their state supplied flu vaccine order may not be filled completely with the brand of vaccine that is requested. So far as inventory will allow the IIP will attempt to fill each order with the brand of vaccine requested.

There are multiple brands of Influenza vaccine available for this fall. A short description of each of the vaccines and its' recommended use follows:

Manufacturer	Brand Name	Packaging Options	Thimerosal preservative	Age indication (Licensed use)	IIP supply status
● Sanofi Pasteur	Fluzone	10 dose vial	Yes	≥ 6 months	Limited supply
		Pre-filled syringes	None	≥ 36 months	Limited supply
		Single dose vial	None	≥ 36 months	Limited supply
		Pre-filled syringes	None	6 – 35 months	Adequate
● MedImmune	FluMist	Single dose sprayer	None	5 – 49 yrs (healthy persons)	Adequate
● Novartis Vaccine	FluViron	10 dose vial	Yes	≥ 4 years	Limited supply
		Pre-filled syringes	None	≥ 4 years	Limited supply
● GlaxoSmithKline	Fluarix	Pre-filled syringes	None	≥ 18 years	Not available thru IIP

Enclosed in this packet is a VACCINE & SUPPLY ORDER FORM updated July 2006. Please note that there will be limited quantities of all brands of inactivated flu vaccine for children 3 years of age through 18 years of age. As of July 18th it is very probable that providers will need to consider the use of FluMist (live attenuated vaccine) for their healthy children who are 5 years of age and older and to use their inactivated flu vaccine for 3 to 5 year olds and for children who are not recommended to receive the live attenuated vaccine.

The IIP will begin to accept Influenza orders from providers beginning August 1st. All orders will be recorded and orders will be filled as soon as possible after the vaccine is received. Please note that providers are urged to order more than once during the season to avoid over-ordering and possible expiration of short supplied vaccine. For medium and larger orders expect that only partial shipments will be made so that all providers will have at least some vaccine to start the season.

Remember that all the 2005/2006 flu vaccine has now expired, so please pull it from your stock and return it to the IIP. The IIP will return the expired vaccine for Federal Excise Tax credit so it is important that all wasted /expired vaccines are mailed back to the IIP on a regular basis.

2006/2007 Influenza vaccine points of importance

- Flu vaccine arrives in multiple deliveries over several months, not all at once.

- It is okay to place more than 1 order during the season.
- Infant flu vaccine should be adequate to meet 6 month to 3 year demand.
- For 3 year through 18 year olds there will be likely be an extremely limited supply of inactivated flu vaccine.
- If there isn't enough inactivated flu vaccine to fill orders consider Live attenuated vaccine for healthy 5 – 18 yr. olds.
- Live attenuated vaccine (FluMist) must be stored in a freezer at 5° F or colder. Varicella certified freezers are okay.
- Infants and Children 6 mos to 9 yrs of age who receive flu vaccine for the very first time should get 2 doses.
- If a child received any brand of flu vaccine last season, they only need 1 dose this season (includes FluMist vaccine).
- Please DO NOT let your flu vaccine supply expire, the CDC recommends continuing to administer flu vaccine beyond the traditional season cut off point.
- Please DO NOT order more than you think you will administer.
- If you have questions regarding flu orders please contact the IIP for assistance at 208-334-5931.

****** Miscellaneous News and Information ******

EIPV from Sanofi Pasteur is not currently available to the IIP as a prefilled syringe presentation. EIPV is only available in 10 dose vials. Should prefilled syringes be offered again the IIP will notify providers of the package option change.

******* Commonly Asked CPT Questions *******

Vaccine Name	CPT Code	ICD-9-CM Code
Tdap	90715	V06.1
Menactra	90734	V03.89
Rotavirus	90680	V04.89
MMR/Var	90710	V06.8